Small PHA Plan Update
Annual Plan for Fiscal Year:

April 1, 2003---March 31, 2004

NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES

HUD 50075 OMB Approval No: 2577-0226 Expires: 03/31/2002

PHA Plan Agency Identification

| PHA Name: Hopkins HRA |
|---|
| PHA Number: MN 078 |
| PHA Fiscal Year Beginning: (mm/yyyy) 04/01/2003 |
| PHA Plan Contact Information: Name: Stacy Unowsky Phone: 952-939-1329 IDD: Email (if available): sunowsky@hopkinsmn.com |
| Public Access to Information Information regarding any activities outlined in this plan can be obtained by contacting: (selected that apply) Main administrative office of the PHA PHA development management offices |
| Display Locations For PHA Plans and Supporting Documents |
| The PHA Plans (including attachments) are available for public inspection at: (select all that apply) Main administrative office of the PHA PHA development management offices Main administrative office of the local, county or State government Public library PHA website Other (list below) |
| PHA Plan Supporting Documents are available for inspection at: (select all that apply) Main business office of the PHA PHA development management offices Other (list below) |
| PHA Programs Administered: |
| Public Housing and Section 8 Section 8 Only Public Housing Only |

Annual PHA Plan Fiscal Year 2003

[24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

| | Contents | Page # |
|----------|--|--------|
| An | nual Plan | |
| i. | Executive Summary (optional) | |
| | NA | |
| ii. | Annual Plan Information | |
| | NA | |
| iii. | Table of Contents | |
| | 1 | |
| 1. | Description of Policy and Program Changes for the Upcoming Fiscal Year | |
| | 2 | |
| 2. | Capital Improvement Needs | |
| | 2 | |
| 3. | Demolition and Disposition | |
| | 2 | |
| 4. | Homeownership: Voucher Homeownership Program | |
| _ | NA | |
| 5. | Crime and Safety: PHDEP Plan | |
| _ | 4 | |
| 6. | Other Information: | |
| | A. Resident Advisory Board Consultation Process | |
| | B. Statement of Consistency with Consolidated Plan | |
| . | C. Criteria for Substantial Deviations and Significant Amendments | |
| Αu | Attachments Attachment Attachment Associated Associated for Posicians | |
| | Attachment: Supporting Documents Available for Review | |
| X | Attachment: Capital Fund Program Annual Statement | |
| | 9-14 | |
| X | | |
| <u> </u> | 15 | |
| | Attachment: Capital Fund Program Replacement Housing Factor Annual | |
| | Statement Statement | |
| | ~ ********** | |

| | Attachment: Public Housing Drug Elimination Program (PHDEP) Plan Attachment E: Resident Membership on PHA Board or Governing Body Attachment D: Membership of Resident Advisory Board or Boards Attachment F: Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text) 17 | 17 16 | |
|--|--|------------|--|
| | Other (List below, providing each attachment name) | | |
| IOA CET | ii. Executive Summary | | |
| | R Part 903.7 9 (r)] A option, provide a brief overview of the information in the Annual Plan | | |
| | ummary of Policy or Program Changes for the Upcoming Year ection, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered | in other | |
| sections | of this Update. | | |
| | y Changes this year include further clarification of tenant selectic ria, grievance procedures, and the pet policy. In addition, we have | | |
| apdated the Schedule of Charges. | | | |
| upua | ted the Schedule of Charges. | | |
| upua | ted the Schedule of Charges. | | |
| upua | ted the Schedule of Charges. | | |
| upua | ted the Schedule of Charges. | | |
| 2. C | apital Improvement Needs | | |
| 2. C : | | | |
| 2. C | apital Improvement Needs R Part 903.7 9 (g)] | this | |
| 2. C : [24 CFF Exempt A. ⊠ | apital Improvement Needs R Part 903.7 9 (g)] ions: Section 8 only PHAs are not required to complete this component. Yes No: Is the PHA eligible to participate in the CFP in the fiscal year covered by | | |
| 2. C. [24 CFF Exempt A.] B. What when the control of the control | apital Improvement Needs R Part 903.7 9 (g)] ions: Section 8 only PHAs are not required to complete this component. Yes No: Is the PHA eligible to participate in the CFP in the fiscal year covered by PHA Plan? nat is the amount of the PHA's estimated or actual (if known) Capital Fund Program gra | nt for the | |
| 2. C. [24 CFF Exempt A.] B. Wlupcom C. [24 CFF Exempt A.] | apital Improvement Needs R Part 903.7 9 (g)] ions: Section 8 only PHAs are not required to complete this component. Yes No: Is the PHA eligible to participate in the CFP in the fiscal year covered by PHA Plan? nat is the amount of the PHA's estimated or actual (if known) Capital Fund Program graning year? \$111,979 Yes No Does the PHA plan to participate in the Capital Fund Program | nt for the | |

The Capital Fund Program 5-Year Action Plan is provided within the Annual Plan.

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided within the Annual Plan.

3. Demolition and Disposition

| [24 CFR Part 903.7 9 (h)] | |
|-----------------------------|--|
| Applicability: Section 8 of | only PHAs are not required to complete this section. |
| 1. ☐ Yes ⊠ No: | Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component; if "yes", complete one activity description for each development.) |
| 1 103 140. | to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component; if "yes", complete one activity |

2. Activity Description

| Demolition/Disposition Activity Description | | | | |
|--|--|--|--|--|
| (Not including Activities Associated with HOPE VI or Conversion Activities) | | | | |
| 1a. Development name: | | | | |
| 1b. Development (project) number: | | | | |
| 2. Activity type: Demolition | | | | |
| Disposition | | | | |
| 3. Application status (select one) | | | | |
| Approved | | | | |
| Submitted, pending approval | | | | |
| Planned application | | | | |
| 4. Date application approved, submitted, or planned for submission: (DD/MM/YY) | | | | |
| 5. Number of units affected: | | | | |
| 6. Coverage of action (select one) | | | | |
| Part of the development | | | | |
| Total development | | | | |
| 7. Relocation resources (select all that apply) | | | | |
| Section 8 for units | | | | |
| Public housing for units | | | | |
| Preference for admission to other public housing or section 8 | | | | |
| Other housing for units (describe below) | | | | |
| 8. Timeline for activity: | | | | |

| a. Actual or projected start date of activity:b. Actual or projected start date of relocation activities: | | | | |
|--|--------|--|--|--|
| c. Projected end date of activity: | | | | |
| 4. Voucher Homeownership Program [24 CFR Part 903.7 9 (k)] A. Yes No: Does the PHA plan to administer a Section 8 Homeownership program | | | | |
| pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 part 982? (If "No", skip to next component; if "yes", describe each progusing the table below (copy and complete questions for each program identified.) | | | | |
| B. Capacity of the PHA to Administer a Section 8 Homeownership Program The PHA has demonstrated its capacity to administer the program by (select all that apply): Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family's resources Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below): | | | | |
| 5. Safety and Crime Prevention: PHDEP Plan 24 CFR Part 903.7 (m)] | | | | |
| Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must prove PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds. | ide a | | | |
| A. Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered be PHA Plan? | y this | | | |
| B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ | | | | |
| C. Yes No Does the PHA plan to participate in the PHDEP in the upcoming if yes, answer question D. If no, skip to next component. | year? | | | |
| D. Yes No: The PHDEP Plan is attached at Attachment | | | | |

6. Other Information [24 CFR Part 903.7 9 (r)]

| A. Resident | Advisory Board (RAB) Recommendations and PHA Response |
|------------------|---|
| 1. X Yes | No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s? |
| 2. If yes, the c | comments are Attached at Attachment (File name) XXX |
| 3. In what ma | nner did the PHA address those comments? (select all that apply) The PHA changed portions of the PHA Plan in response to comments A list of these changes is included Yes No: below or Yes No: at the end of the RAB Comments in Attachment XXX |
| | Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment |
| | Other: (list below) |
| B. Statement | t of Consistency with the Consolidated Plan |
| | ble Consolidated Plan, make the following statement (copy questions as many times as necessary). |
| 1. Consolidate | ed Plan jurisdiction: Hennepin County Minnesota |
| | as taken the following steps to ensure consistency of this PHA Plan with the d Plan for the jurisdiction: (select all that apply) |
| \boxtimes | The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s. |
| | The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan. |
| \boxtimes | The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan. |
| | Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below) |
| | Other: (list below) |
| 3. PHA Requ | nests for support from the Consolidated Plan Agency |

| | Yes No: Does the PHA request financial or other support from the State or local governmagency in order to meet the needs of its public housing residents or inventory? If ye please list the 5 most important requests below: | |
|----|---|--|
| 4. | The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below) | |

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan:

When a decision is made by the Board of Commisioners to change the PHA's mission statement, goals, or objectives that are identified in the 5-year Plan. It can also be when goals or objectives that are changed that affect the residents or have a significant impact to the PHA's financial situation.

B. Significant Amendment or Modification to the Annual Plan:

Changes in the plans or policies of the PHA that require formal approval of the Board of Commissioners.

Attachment_A_ Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

| | List of Supporting Documents Available for Revi | |
|------------------|--|---------------------------------------|
| Applicable | Supporting Document | Related Plan |
| & On Diamlari | | Component |
| On Display X | DIIA Dian Contifications of Commission of with the DIIA Diang and | 5 Year and Annual |
| Λ | PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations | Plans |
| | State/Local Government Certification of Consistency with the | 5 Year and Annual |
| | Consolidated Plan (not required for this update) | Plans |
| | Consolidated Plan (not required for this update) | Plans |
| X | Fair Housing Documentation Supporting Fair Housing | 5 Year and Annual |
| | Certifications: Records reflecting that the PHA has examined its | Plans |
| | programs or proposed programs, identified any impediments to fair | |
| | housing choice in those programs, addressed or is addressing | |
| | those impediments in a reasonable fashion in view of the resources | |
| | available, and worked or is working with local jurisdictions to | |
| | implement any of the jurisdictions' initiatives to affirmatively | |
| | further fair housing that require the PHA's involvement. | |
| X | Housing Needs Statement of the Consolidated Plan for the | Annual Plan: |
| | jurisdiction/s in which the PHA is located and any additional | Housing Needs |
| | backup data to support statement of housing needs in the | |
| | jurisdiction | |
| X | Most recent board-approved operating budget for the public | Annual Plan: |
| | housing program | Financial Resources |
| X | Public Housing Admissions and (Continued) Occupancy Policy | Annual Plan: Eligibility, |
| | (A&O/ACOP), which includes the Tenant Selection and | Selection, and |
| | Assignment Plan [TSAP] | Admissions Policies |
| | Any policy governing occupancy of Police Officers in Public | Annual Plan: Eligibility, |
| | Housing | Selection, and |
| | check here if included in the public housing | Admissions Policies |
| | A&O Policy | |
| | Section 8 Administrative Plan | Annual Plan: Eligibility, |
| | | Selection, and |
| X | Dublic housing cont determination melicies, including the arrest. | Admissions Policies Annual Plan: Rent |
| Λ | Public housing rent determination policies, including the method for setting public housing flat rents | Determination |
| | | Determination |
| | check here if included in the public housing | |
| | A & O Policy | 4 101 5 |
| | Schedule of flat rents offered at each public housing development | Annual Plan: Rent |
| | check here if included in the public housing | Determination |
| | A & O Policy | |

| List of Supporting Documents Available for Review | | |
|---|--|--|
| Applicable & On Display | Supporting Document | Related Plan Component |
| | Section 8 rent determination (payment standard) policies check here if included in Section 8 Administrative Plan | Annual Plan: Rent Determination |
| X | Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation) | Annual Plan: Operations and Maintenance |
| X | Results of latest binding Public Housing Assessment System (PHAS) Assessment | Annual Plan: Management and Operations |
| X | Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary) No Follow Up Reqd This Year | Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency |
| | Results of latest Section 8 Management Assessment System (SEMAP) | Annual Plan: Management and Operations |
| | Any required policies governing any Section 8 special housing types check here if included in Section 8 Administrative Plan | Annual Plan: Operations and Maintenance |
| | Public housing grievance procedures check here if included in the public housing A & O Policy | Annual Plan: Grievance Procedures |
| | Section 8 informal review and hearing procedures check here if included in Section 8 Administrative Plan | Annual Plan: Grievance Procedures |
| X | The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year | Annual Plan: Capital Needs |
| X | Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants | Annual Plan: Capital Needs |
| | Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing | Annual Plan: Capital Needs |
| X | Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing § 504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA). | Annual Plan: Capital Needs |
| | Approved or submitted applications for demolition and/or disposition of public housing | Annual Plan: Demolition and Disposition |
| | Approved or submitted applications for designation of public housing (Designated Housing Plans) | Annual Plan: Designation of Public Housing |

| Applicable Supporting Documents Available for Review Related Plan | | |
|--|--|--------------------------------------|
| Applicable & | Supporting Document | Component |
| On Display | | Component |
| On Display | Approved or submitted assessments of reasonable revitalization of | Annual Plan: |
| | public housing and approved or submitted conversion plans | Conversion of Public |
| | prepared pursuant to section 202 of the 1996 HUD Appropriations | Housing |
| | Act, Section 22 of the US Housing Act of 1937, or Section 33 of the | Housing |
| | US Housing Act of 1937 | |
| | Approved or submitted public housing homeownership | Annual Plan: |
| | programs/plans | Homeownership |
| | Policies governing any Section 8 Homeownership program | Annual Plan: |
| | (sectionof the Section 8 Administrative Plan) | Homeownership |
| | Cooperation agreement between the PHA and the TANF agency | Annual Plan: |
| | and between the PHA and local employment and training service | Community Service & |
| | agencies | Self-Sufficiency |
| | FSS Action Plan/s for public housing and/or Section 8 | Annual Plan: |
| | | Community Service & |
| | | Self-Sufficiency |
| X | Section 3 documentation required by 24 CFR Part 135, Subpart E | Annual Plan: |
| | | Community Service & |
| | M If fC' : (ED/00 TOD DOGG 4 | Self-Sufficiency |
| | Most recent self-sufficiency (ED/SS, TOP or ROSS or other | Annual Plan: |
| | resident services grant) grant program reports | Community Service & Self-Sufficiency |
| | The most recent Public Housing Drug Elimination Program | Annual Plan: Safety |
| | (PHEDEP) semi-annual performance report | and Crime Prevention |
| | PHDEP-related documentation: | Annual Plan: Safety |
| | ·? Baseline law enforcement services for public housing | and Crime Prevention |
| | developments assisted under the PHDEP plan; | |
| | ·? Consortium agreement/s between the PHAs participating | |
| | in the consortium and a copy of the payment agreement | |
| | between the consortium and HUD (applicable only to | |
| | PHAs participating in a consortium as specified under 24 | |
| | CFR 761.15); | |
| | ·? Partnership agreements (indicating specific leveraged | |
| | support) with agencies/organizations providing funding, | |
| | services or other in-kind resources for PHDEP-funded | |
| | activities; | |
| | ·? Coordination with other law enforcement efforts; | |
| | •? Written agreement(s) with local law enforcement agencies | |
| | (receiving any PHDEP funds); and | |
| | ·? All crime statistics and other relevant data (including Part | |
| | I and specified Part II crimes) that establish need for the | |
| X | public housing sites assisted under the PHDEP Plan. Policy on Ownership of Pote in Public Housing Femily. | Dat Daliay |
| Λ | Policy on Ownership of Pets in Public Housing Family | Pet Policy |
| | Developments (as required by regulation at 24 CFR Part 960, Subpart G) | |
| | | |
| | check here if included in the public housing A & O Policy | |

| List of Supporting Documents Available for Review | | |
|---|---|------------------------------|
| Applicable & On Display | Supporting Document | Related Plan Component |
| | The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings | Annual Plan: Annual Audit |
| | Troubled PHAs: MOA/Recovery Plan | Troubled PHAs |
| | Other supporting documents (optional) (list individually; use as many lines as necessary) | (specify as needed) |

| Annu | al Statement/Performance and Evalua | ation Report | | | |
|------|---|--------------------------|--------------------------|-------------------------------|----------------------|
| Capi | tal Fund Program and Capital Fund P | rogram Replacem | ent Housing Facto | or (CFP/CFPRHF) I | Part 1: Summary |
| | me: Hopkins HRA | Grant Type and Number | | , | Federal FY of Grant: |
| | | Capital Fund Program: MN | V46PO7850101 | | 2001 |
| | | Capital Fund Program | | | |
| | | Replacement Housing | | | |
| | inal Annual Statement | | | ed Annual Statement (revision | no: 2) |
| Perf | ormance and Evaluation Report for Period Ending: 09/30/ | | ce and Evaluation Report | | |
| Line | Summary by Development Account | Total Es | stimated Cost | Total | Actual Cost |
| No. | | | | | |
| | | Original/Rev #1 | Revised | Obligated | Expended |
| 1 | Total non-CFP Funds | | | | |
| 2 | 1406 Operations | 20,610 | 20,000 | 11,000 | 11,000 |
| 3 | 1408 Management Improvements | | | | |
| 4 | 1410 Administration | | | | |
| 5 | 1411 Audit | | | | |
| 6 | 1415 liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | 4,000 | | | |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | | | | |
| 10 | 1460 Dwelling Structures | 93,000 | 97,610 | 74,650 | 61,180 |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | |
| 12 | 1470 Nondwelling Structures | | | | |
| 13 | 1475 Nondwelling Equipment | | | | |
| 14 | 1485 Demolition | | | | |
| 15 | 1490 Replacement Reserve | | | | |
| 16 | 1492 Moving to Work Demonstration | | | | |
| 17 | 1495.1 Relocation Costs | | | | |
| 18 | 1498 Mod Used for Development | | | | |
| 19 | 1502 Contingency | | | | |
| 20 | Amount of Annual Grant: (sum of lines 2-19) | 117,610 | 117,610 | 85,650 | 72,180 |
| 21 | Amount of line 20 Related to LBP Activities | | | | |
| 22 | Amount of line 20 Related to Section 504 Compliance | | | | |

| | Annual Statement/Performance and Evaluation Report | | | | | | | | |
|--------|---|---------------------------|----------------------------|------------------------------|----------------------|--|--|--|--|
| Capi | Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary | | | | | | | | |
| PHA Na | me: Hopkins HRA | Grant Type and Number | | | Federal FY of Grant: | | | | |
| | | Capital Fund Program: MN4 | 6PO7850101 | | 2001 | | | | |
| | | Capital Fund Program | | | | | | | |
| | | Replacement Housing I | | | | | | | |
| Orig | inal Annual Statement | Reserve for Disaster | s/ Emergencies 🔀 Revised A | nnual Statement (revision no | : 2) | | | | |
| Perf | ormance and Evaluation Report for Period Ending: 09/30/ | 2002 🔲 Final Performance | and Evaluation Report | | | | | | |
| Line | Summary by Development Account | Total Esti | mated Cost | Total Ac | etual Cost | | | | |
| No. | | | | | | | | | |
| 23 | Amount of line 20 Related to Security | | | | | | | | |
| 24 | Amount of line 20 Related to Energy Conservation | 106,610 | 74,650 | | | | | | |
| | Measures | | | | | | | | |

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

| PHA Name: Hopkins HRA | HA Name: Hopkins HRA | | | 5PO7850101 | Federal FY of Grant: 2001 | | | | |
|-------------------------|--|---------------|---------------|------------|---------------------------|--------------------|-------------------|--------------------|--|
| | | Replacement 1 | Housing Facto | r #: | | | | | |
| Development Number | General Description of Major Work Categories | Dev. Acct No. | Quantity | Total Esti | Total Estimated Cost | | Total Actual Cost | | |
| Name/HA-Wide Activities | | | | Original | Revised | Funds Obligated | Funds Expended | Work | |
| MN78-001 | Replace Boiler/ Heating System at Dow Towers | 1460 | 2 | 93,000 | 74,650 | 74,650 | 61,180 | Almost complete | |
| MN78-001 | Operations | 1406 | | 20,610 | 20,000 | 11,000 | 11,000 | | |
| MN78-001 | Carpet Replacement & Updating on First Floor at Dow Towers | 1460 | 1 | 0 | 12,000 | 0 | 0 | Planning stages | |
| MN78-001 | Fees & Costs | 1430 | Lump Sum | 4,000 | 0 | 0 | 0 | planning | |
| MN78-001 | Replace the Roof at Dow | 1460 | 1 | 0 | 10,960 | 0 | 0 | planning | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

| PHA Name: Hopkins HRA | | Grant Type and Number | | | | Federal FY of Grant: 2001 | | |
|-------------------------|---|-------------------------------|----------|---------------------------------------|---------|---------------------------|----------|-----------|
| - | | | | Capital Fund Program #: MN46PO7850101 | | | | |
| | Capital Fund Program | | | | | | | |
| | | Replacement Housing Factor #: | | | | | | |
| Development Number | Development Number General Description of Major Work De | | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of |
| | Categories | | | | | | | Proposed |
| Name/HA-Wide Activities | | | | Original | Revised | Funds | Funds | Work |
| | | | | | | Obligated | Expended | |
| | | | | | | | | |

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule

| PHA Name: Hopkins HRA | | Grant | Type and Nur | nber | | | Federal FY of Grant: 2001 |
|-----------------------|----------|----------------|-----------------|-------------------|--------------------|--------|----------------------------------|
| | | Capita | ıl Fund Prograi | n #: MN46PO7 | 850101 | | |
| | | Capita | ıl Fund Prograi | n Replacement Hou | sing Factor #: | | |
| Development Number | All | Fund Obligate | ed | | Il Funds Expended | | Reasons for Revised Target Dates |
| Name/HA-Wide | (Qua | art Ending Dat | te) | (Q | uarter Ending Date | e) | |
| Activities | | | | | T | 1 | |
| | Original | Revised | Actual | Original | Revised | Actual | |
| MN78-001 | 12/31/02 | 06/30/03 | | 03/31/04 | | | |
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| Ann | ual Statement/Performance and Eva | luation Report | | | |
|------|--|-------------------------|---------------------------|---------------------------------|--|
| | ital Fund Program and Capital Fund | - | ement Housing Fac | tor (CFP/CFPRHF) | Part 1: Summary |
| _ | Vame: Hopkins HRA | Grant Type and Numbe | | (| Federal FY of Grant: |
| | ··· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· | Capital Fund Program: N | | | 2002 |
| | | Capital Fund Program | 11110107030102 | | |
| | | | ing Factor Grant No: | | |
| Ori | iginal Annual Statement | | | ised Annual Statement (revision | on no: 1) |
| | formance and Evaluation Report for Period Ending: 09 | | nce and Evaluation Report | Sea I Imium Suncincin (164B) | ······································ |
| Line | Summary by Development Account | | Estimated Cost | Tota | l Actual Cost |
| No. | * | | | | |
| | | Original | Revised | Obligated | Expended |
| 1 | Total non-CFP Funds | | | | |
| 2 | 1406 Operations | 14,979 | 14,979 | 0 | 0 |
| 3 | 1408 Management Improvements | | | | |
| 4 | 1410 Administration | | | | |
| 5 | 1411 Audit | | | | |
| 6 | 1415 liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | 7,000 | 10,000 | 0 | 0 |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | | 7,000 | 0 | 0 |
| 10 | 1460 Dwelling Structures | 90,000 | 80,000 | 0 | 0 |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | |
| 12 | 1470 Nondwelling Structures | | | | |
| 13 | 1475 Nondwelling Equipment | | | | |
| 14 | 1485 Demolition | | | | |
| 15 | 1490 Replacement Reserve | | | | |
| 16 | 1492 Moving to Work Demonstration | | | | |
| 17 | 1495.1 Relocation Costs | | | | |
| 18 | 1498 Mod Used for Development | | | | |
| 19 | 1502 Contingency | | | | |
| 20 | Amount of Annual Grant: (sum of lines 2-19) | 111,979 | 111,979 | 0 | 0 |
| 21 | Amount of line 20 Related to LBP Activities | | | | |

| Ann | ual Statement/Performance and Evalu | ation Report | | | |
|-------|---|------------------------------|-----------------------|------------------------------|----------------------|
| Cap | ital Fund Program and Capital Fund | Program Replacem | ent Housing Factor | (CFP/CFPRHF) Pa | art 1: Summary |
| PHA N | ame: Hopkins HRA | Grant Type and Number | | | Federal FY of Grant: |
| | | Capital Fund Program: MN | 46PO7850102 | | 2002 |
| | | Capital Fund Program | | | |
| | | Replacement Housing l | | | |
| | ginal Annual Statement | | | Annual Statement (revision n | 1) |
| Per | formance and Evaluation Report for Period Ending: 09/30 | 0/02 Final Performance a | and Evaluation Report | | |
| Line | Summary by Development Account | Total Esti | mated Cost | Total Ac | ctual Cost |
| No. | | | | | |
| 22 | Amount of line 20 Related to Section 504 Compliance | | | | |
| 23 | Amount of line 20 Related to Security | | | | |
| 24 | Amount of line 20 Related to Energy Conservation | 97,000 | 80,000 | | |
| | Measures | | | | |

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) PHA Name: Hopkins HRA

Grant Type and Number

| PHA Name: Hopkins HR. | A | Grant Type and | | | | Federal FY of Grant: 2002 | | |
|-----------------------|-----------------------------------|-----------------|--------------------|------------|------------|---------------------------|-----------|------|
| | | Capital Fund Pr | rogram #: MN46 | PO7850102 | | | | |
| | | Capital Fund P | rogram | | | | | |
| | | _ | ent Housing Factor | r #: | | | | |
| Development Number | General Description of Major Work | Dev. Acct | Quantity | Total Esti | mated Cost | Total Ac | Status of | |
| | Categories | No. | | | | | | |
| Name/HA-Wide | | | | Original | Revised | Funds | Funds | Work |
| Activities | | | | | | Obligated | Expended | |
| MN078001 | Replace Roof at Dow | 1460 | 1 | 50,000 | 45,000 | | | |
| 1.070001 | D 1 D 6 T 1 D | 1460 | | | 20,000 | | | |
| MN078001 | Replace Roof at Townhome Dev | 1460 | 1 | 0 | 30,000 | | | |
| MN078001 | Hire A/E to Design Work | 1430 | 1 | 7,000 | 10,000 | | | |
| 2.22.107.000 | & Do Physical Needs Assessment | | | ,,,,,, | | | | |
| MN078001 | Operations | 1406 | Lump Sum | 14,979 | 14,979 | | | |
| MN078001 | Detaining Well of Toyunkomas | 1475 | 1 | 0 | 7,000 | | | |
| IVIINU/8001 | Retaining Wall at Townhomes | 14/3 | 1 | U | 7,000 | | | |
| MN078001 | Renovate HA Unit | 1460 | 1 | 40,000 | 0 | | | |
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Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule

| PHA Name: Hopkins HRA | | Grant | Type and Nur | nber | | | Federal FY of Grant: 2002 |
|-----------------------|----------|----------------|-----------------------|-------------------|--------------------|----------------------------------|---------------------------|
| | | Capita | ıl Fund Prograi | n #: MN46PO7 | 850102 | | |
| | | Capita | ıl Fund Prograi | n Replacement Hou | sing Factor #: | | |
| Development Number | All | Fund Obligate | ed All Funds Expended | | | Reasons for Revised Target Dates | |
| Name/HA-Wide | (Qua | art Ending Dat | te) | (Q | uarter Ending Date | e) | |
| Activities | | | | | T | 1 | |
| | Original | Revised | Actual | Original | Revised | Actual | |
| MN078001 | 12/31/03 | | | 06/30/05 | | | |
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| Ann | ual Statement/Performance and Eva | aluation Report | | | |
|------|--|--------------------------|--------------------|--|----------------------|
| | ital Fund Program and Capital Fun | - | ent Housing Factor | (CFP/CFPRHF) P | art 1: Summarv |
| _ | Iame: Hopkins HRA | Grant Type and Number | | (==:, ================================== | Federal FY of Grant: |
| | ··· ·· · · · · · · · · · · · · · · · · | Capital Fund Program: MN | 16PO7850103 | | 2003 |
| | | Capital Fund Program | +01 0 / 030103 | | |
| | | Replacement Housing F | actor Grant No: | | |
| Ori | ginal Annual Statement XX | 1 | | Annual Statement (revision r | no.) |
| | formance and Evaluation Report for Period Ending: \Box | | | imaa saamin (i erision i | <i>)</i> |
| Line | Summary by Development Account | | nated Cost | Total A | ctual Cost |
| No. | , , , , , , , , , , , , , , , , , , , | | | | |
| | | Original | Revised | Obligated | Expended |
| 1 | Total non-CFP Funds | | | | |
| 2 | 1406 Operations | | | | |
| 3 | 1408 Management Improvements | | | | |
| 4 | 1410 Administration | | | | |
| 5 | 1411 Audit | | | | |
| 6 | 1415 liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | 10,000 | | | |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | 6,000 | | | |
| 10 | 1460 Dwelling Structures | 94,000 | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | |
| 12 | 1470 Nondwelling Structures | | | | |
| 13 | 1475 Nondwelling Equipment | | | | |
| 14 | 1485 Demolition | | | | |
| 15 | 1490 Replacement Reserve | | | | |
| 16 | 1492 Moving to Work Demonstration | | | | |
| 17 | 1495.1 Relocation Costs | | | | |
| 18 | 1498 Mod Used for Development | | | | |
| 19 | 1502 Contingency | | | | |
| 20 | Amount of Annual Grant: (sum of lines 2-19) | 110,000 | | | |
| 21 | Amount of line 20 Related to LBP Activities | | | | |

| Ann | ual Statement/Performance and Evalu | ation Report | | | |
|-------|---|-----------------------------|--------------------|-------------------------------|----------------------|
| Cap | ital Fund Program and Capital Fund l | Program Replacemo | ent Housing Factor | (CFP/CFPRHF) Pa | art 1: Summary |
| PHA N | ame: Hopkins HRA | Grant Type and Number | | | Federal FY of Grant: |
| | | Capital Fund Program: MN | 46PO7850103 | | 2003 |
| | | Capital Fund Program | | | |
| | | Replacement Housing I | | | |
| | ginal Annual Statement XX | | | Annual Statement (revision no | o:) |
| Per | formance and Evaluation Report for Period Ending: \Box Fi | nal Performance and Evaluat | ion Report | | |
| Line | Summary by Development Account | Total Estin | mated Cost | Total Ac | tual Cost |
| No. | | | | | |
| 22 | Amount of line 20 Related to Section 504 Compliance | | | | |
| 23 | Amount of line 20 Related to Security | | | | |
| 24 | Amount of line 20 Related to Energy Conservation | | | | |
| | Measures | | | | |

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages Grant Type and Number Figure 157 of C

| PHA Name: Hopkins HR | A | Grant Type and | d Number | | Federal FY of Grant: 2003 | | | |
|----------------------|--|----------------|--------------------|------------------------|---------------------------|-----------|-------------|-----------------------|
| • | | Capital Fund P | rogram #: MN46 | PO7850103 | | | | |
| | | Capital Fund P | rogram | | | | | |
| | | | ent Housing Factor | · #: | | | | |
| Development Number | General Description of Major Work | Dev. Acct | Quantity | y Total Estimated Cost | | Total Ac | tual Cost | Status of Proposed |
| Name/HA-Wide | | | No. | | Original Revised | | Funds Funds | |
| Activities | | | | | | Obligated | Expended | |
| MN078001 | Repaint & Carpet Common Areas | 1460 | Lump Sum | 15,000 | | | | |
| MN078001 | Replace Light Poles at Dow | 1450 | Lump Sum | 6,000 | | | | |
| MN078001 | Hire A/E to Manage Contracts | 1430 | Lump Sum | 10,000 | | | | |
| MN078001 | Replace Exterior & Screen Doors at Townhomes | 1460 | 20 | 20,000 | | | | |
| MN078001 | Clean Stucco & Paint Stoops at Townhomes | 1460 | 20 | 15,000 | | | | |
| MN078001 | Replace Boilers at Townhomes | 1460 | 10 | 44,000 | | | | |
| MN078001 | | | | | | | | |
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Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule

| PHA Name: Hopkins HRA | | Grant | Type and Nur | nber | | Federal FY of Grant: 2003 | | | |
|---------------------------------------|---------------------|---------|--|-----------------------|---------|---------------------------|----------------------------------|--|--|
| Capital Fund Program #: MN46PO7850103 | | | | | | | | | |
| | | Capita | Capital Fund Program Replacement Housing Factor #: | | | | | | |
| Development Number All Fund Obligated | | | ed | All Funds Expended | | | Reasons for Revised Target Dates | | |
| Name/HA-Wide | (Quart Ending Date) | | | (Quarter Ending Date) | | | | | |
| Activities | | T | | | | | | | |
| | Original | Revised | Actual | Original | Revised | Actual | | | |
| MN078001 | 05/31/05 | | | 05/31/06 | | | | | |
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Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

| | CFP 5-Year Action Plan | | |
|---|--|-----------------------|--------------------|
| □ Original statement □ Original s | | | |
| Development | | | |
| Number | (or indicate PHA wide) | | |
| MN 078 | Hopkins HRA | | |
| Description of Neede | d Physical Improvements or Management Improvements | Estimated Cost | Planned Start Date |
| | | | (HA Fiscal Year) |
| Carpet, Painting & F | looring Replacement in Common Areas | 15,000 | 2003 |
| Replacement of Exterior Light Poles at Dow Towers | | 6,000 | 2003 |
| Exterior & Screen Do | oor Replacement at Townhomes | 20,000 | 2003 |
| Clean Stucco and Pai | nt Stoops at Townhomes | 15,000 | 2003 |
| Replace 10 hot water | Boilers at Townhomes | 75,000 | 2004 |
| Patch and Sealcoat P | arking Lots at Dow | 8,000 | 2004 |
| Elevator Modernizat | ion | 130,000 | 2005 |
| Exterior Door and Ha | ardware Replacement at Dow Towers | 30,000 | 2005 |
| Rehab of Kitchen Ar | eas in units at Dow Towers | 150,000 | 2006 |
| Lobby & Community | Room Improvements | 20,000 | 2007 |
| Complete final HA U | nit | 75,000 | 2007 |
| | | | |
| | | | |
| | | | |
| Total estimated cost | over next 5 years | 544,000 | |

*Each year the HRA will consider up to 10% of the Capital Funding for Operations use as deemed necessary.

| Required Attachment _D: Resident Member on the PHA Governing Board | | | | | |
|---|--|--|--|--|--|
| 1. Yes No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2) | | | | | |
| A. Name of resident member(s) on the governing board: | | | | | |
| B. How was the resident board member selected: (select one)? Elected Appointed | | | | | |
| C. The term of appointment is (include the date term expires): | | | | | |
| 2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not? the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board. Other (explain): | | | | | |
| B. Date of next term expiration of a governing board member: $1/1/2004$ | | | | | |
| C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): | | | | | |
| Eugene Maxwell- Mayor and HRA Board Chair | | | | | |
| | | | | | |

| Required Attachment E: | Membership | of the Resident A | Advisory | Board | or Boards |
|------------------------|------------|-------------------|----------|--------------|-----------|
|------------------------|------------|-------------------|----------|--------------|-----------|

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Judy Tholen
Jim Smuckler
Doris Smuckler
Arthur Lopez
An Song Rosier
Judy Voigt
Donald Kodlowski

Required Attachment F: Comments of Resident Advisory Board

The RAB had general discussions on the policy changes in relation to the applicant screening process and their thoughts indicated a concern for strict policies regarding criminal history. In addition, concerns were raised about applicants who need supportive services to remain lease compliant. In revising the policies their concerns are noted and incorporated in the tenant selection area and the lease termination and grievance procedures.

The residents were supportive of developing a resident helper program which would result in stipends being utilized for residents that help the housing authority in various capacities.

Many residents complimented the HRA for the efforts over the last year with the numerous capital improvements and made their wished know for improvements in the future.

Management and residents were in agreement over the proposed changes and the RAB meetings helped to further clarify issues within the policies.